



In re Application of:

HARUO MACHIDA

Application No.: 09/559,455

Filed: April 28, 2000

For: DATA PROCESSING APPARATUS,
DATA PROCESSING METHOD,
AND STORAGE MEDIUM STORING
COMPUTER-READABLE PROGRAM

Docket No. 03500.014455

Examiner: Tadesse Hailu

Group Art Unit: 2173

Date: February 3, 2003

RECEIVED
FEB 14 2003
Technology Center 2100

COMMISSIONER FOR PATENTS
Washington, D.C. 20231

Sir:

Transmitted herewith is an amendment in the above-identified application.

☐ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	74	MINUS	45	= 29	x \$9 \$18	\$522.00
INDEP. CLAIMS	9	MINUS	6	= 3	x \$42 \$84	\$252.00
Fee for Multiple Dependent claims \$140°/\$280						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$774.00

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.

I hereby certify that this correspondence is being
deposited with the United States Postal Service as
first class mail in an envelope addressed to:
Assistant Commissioner for Patents, Washington,
D.C. 20231 on

February 3, 2003

(Date of Deposit)

Carole A. Quinn, Reg. No. 99,000

Name of Attorney for Applicant

Signature

Date of Signature 2/3/03

☒ A check in the amount of \$ 774.00 is enclosed.

☐ Charge \$____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

☒ Any prior general authorization to charge an issue fee under 37 C.F.R. § 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. §§ 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

☒ A check in the amount of \$110.00 to cover the fee for a one month extension is enclosed.

☐ A check in the amount of \$____ to cover the Information Disclosure Statement fee is enclosed.

☒ Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Attorney for Applicant

Registration No. 39,000

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